

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 188 OF 452
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
New York Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)
A. Ms. Maureen Foley

Mailing Address 474 48th Avenue Apt. 12C

City State Zip Code
 Long Island City NY 11109-5612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 New York Life Insurance Company Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 09 / 30 / 2012
Transaction ID : PR3067272

Amount of Each Receipt this Period
 300.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Mr. Michael M. Oleske

Mailing Address 59 the Neck

City State Zip Code
 Manhasset NY 11030-1315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 New York Life Insurance Company Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 950.00

Date of Receipt
 09 / 30 / 2012
Transaction ID : PR3087272

Amount of Each Receipt this Period
 100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Ms. Michelle R. Albright

Mailing Address 2006 Sea Palms Drive West

City State Zip Code
 St. Simons Island GA 31522-0000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 New York Life Insurance Company Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1800.00

Date of Receipt
 09 / 30 / 2012
Transaction ID : PR31609207272

Amount of Each Receipt this Period
 200.00

P/R Deduction (\$200.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 330.00

TOTAL This Period (last page this line number only)..... ▶